

4/8/04

(P-3/74) Atty. Dkt. No. 047711-0216

#### IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant:

Ronald J. LEBEL, et al.

Title:

AMBULATORY MEDICAL

APPARATUS AND METHOD

**USING A ROBUST** 

COMMUNICATION PROTOCOL

Appl. No.:

09/768,043

Filing Date:

1/22/2001

Examiner:

Daniel Leon Robinson

Art Unit:

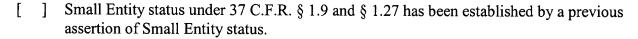
3742

## **AMENDMENT TRANSMITTAL**

Commissioner for Patents PO Box 1450 Alexandria, Virginia 22313-1450

Sir:

Transmitted herewith is an amendment in the above-identified application.



[ ] Assertion of Small Entity status is enclosed.

[X] The fee required for additional claims is calculated below:

	Claims As		Previously		Extra Claims				Additional
 	Amended		Paid For		Present		Rate		Claims Fee
Total Claims:	44	-	42	=	2	X	\$18.00	=	\$36.00
Independent Claims:	3	-	2	=-	1	x	\$86.00	=	\$86.00
First pr	resentation of	an	y Multiple D	Deper	ndent Claims:	+	\$290.00	=	\$0.00
•					CLAIMS	FEE	TOTAL	=	\$122.00

RECEIVED
COUD 3700

[X] Applicant hereby petitions for an extension of time under 37 C.F.R. §1.136(a) for the total number of months checked below:

[X] Extension for response filed within the first month:	\$110.00	\$110.00
[ ] Extension for response filed within the second month:	\$420.00	\$0.00
[ ] Extension for response filed within the third month:	\$950.00	. \$0.00
[ ] Extension for response filed within the fourth month:	\$1,480.00	\$0.00
[ ] Extension for response filed within the fifth month:	\$2,010.00	\$0.00
EXTENSION	I FEE TOTAL:	\$110.00
[ ] Statutory Disclaimer Fee under 37 C.F.R. 1.20(d):	\$110.00	\$0.00
CLAIMS, EXTENSION AND DISCLAIMER	R FEE TOTAL:	\$232.00
[ ] Small Entity Fees Apply (subtra	ct ½ of above):	\$0.00
	TOTAL FEE:	\$232.00

- Please charge Deposit Account No. 50-0872 in the amount of \$232.00. A duplicate copy of this transmittal is enclosed.
- [X] A check in the amount of \$232.00 is enclosed.
- [X] The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 50-0872. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 50-0872. If any extensions of time are needed for timely acceptance of papers submitted herewith, applicant hereby petitions for such extension under 37 C.F.R. §1.136 and authorizes payment of any such extensions fees to Deposit Account No. 50-0872.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Date: \_\_\_\_\_April 7, 2004

FOLEY & LARDNER LLP

Customer Number: 23392 Telephone: (310) 975-7963

Facsimile:

(310) 557-8475

Respectfully submitted,

Zed R. Rittmaster

Attorney for Applicant Registration No. 32,933



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### CERTIFICATE OF EXPRESS MAILING I hereby certify that this correspondence is being deposited with the United States Postal Service's "Express Mail Post Office To Addressee" service under 37 C.F.R. § 1.10 on the date indicated below and is addressed to: Commissioner for Patents, PO Box 1450, Alexandria, Virginia 22313-1450. EV 420555597 April 7, 2004 (Express Mail Label Number) (Date of Deposit)

# RECEIVED COUD 3700 AMENDMENT AND REPLY UNDER 37 CFR 1.111

Commissioner for Patents PO Box 1450 Alexandria, Virginia 22313-1450

Sir:

This communication is responsive to the Non-Final Office Action dated December 17, 2003, concerning the above-referenced patent application.

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this document.

Remarks/Arguments begin on page 9 of this document.

Please amend the application as follows:

04/09/2004 SDENBOB1 00000090 09768043

01 FC:1202 02 FC:1201

36.00 OP 86.00 OP

04/09/2004 SDENBOB1 00000090 09768043

03 FC:1251

110.00 OP